## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or <u>Fax</u>

(703) 746-4000

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

22496

7590

ROBERT T JOHNSON 603 COLLINS STREET PLYMOUTH, WI 53073



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

PROBERT T.	JOHNSON	(Depositor's name
	PINIO	
	03/15	1200 4 (Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	ÇONFIRMATION NO.
10/086,820	03/04/2002	Neal R. Verfuerth	OR-1-02	3419

TITLE OF INVENTION: FLUORESCENT HANGING LIGHT FIXTURE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	06/09/2004
EXA	MINER	ART UNIT	CLASS-SUBCLASS		
HUSAR,	STEPHEN F	. 2875	362-241000	_	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Robert T. Johnson Registered Patent Agent 603 Collins St. 3 Plymouth, WI 53073

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

4a. The following fee(s) are enclosed:    Ab. Payment of Fee(s):   Acheck in the amount of the fee(s) is enclosed.   Compared to the fee(s) is enc	Please check the appropriate assignee category or categories (v		individual	□ corporation or other private group entity	
	Issue Fee Publication Fee	☐ Payment by credit c☐ The Director is her	ard. Form PTO-: eby authorized	2038 is attached. CK#1834 by charge the required fee(s), or credit any	overpayment, to

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)	20	(Date)	1 /
Solenta	Eleme	n o	3/15/2004
NOTE; The Issue Fee and Publiother than the applicant; a regin interest as shown by the records of	ication Fee (if require stered attorney or age of the United States Pa	ed) will not be ent; or the assign tent and Tradem	accepted from anyone mee or other party in ark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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03/24/2004 MBERHE1 00000182 10086820

665.00 OP 30.00 DP MIR 2 2 2004 Page

PTO/SB/21 (02-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE erwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/086,820 TRANSMITTAL Filing Date 03/04/2002 **FORM** First Named Inventor NEAL R. VERFUERTH Art Unit 2875 (to be used for all correspondence after initial filing) Examiner Name HUSAR, STEPHEN F. Attorney Docket Number OR-1-02 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance communication ~ Drawing(s) Fee Transmittal Form to Technology Center (TC) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a **Proprietary Information** Provisional Application After Final Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Terminal Disclaimer Identify below): **Extension of Time Request** Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Remarks Certified Copy of Priority ISSUE FEE TRANSMITTAL Document(s) CHECK # 1834 FOR \$695.00 SELF ADDRESSED PREPAID POST CARD Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm ROBERT T. JOHNSON REGISTERED PATENT AGENT LLC REG. #28958 Individual name Signature Date 2004 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name ROBERT T. JOHNSON Signature

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032

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		for	FY	200	04	

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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(\$) 695

Complete if Known		
Application Number	10/086,820	
Filing Date	03/04/2002	
First Named Inventor	NEAL R. VERFUERTH	·
Examiner Name	HUSAR, STEPHEN F.	
Art Unit	2875	
Attorney Docket No.	OR-1-02	

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Check Credit card Money Other None	3. ADDITIONAL FEES			
Deposit Account:	Large Entity   Small Entity			
Denosit	Fee Fee Fee Fee Description Code (\$)	ee Paid		
Account   502736	1051 130 2051 65 Surcharge - late filing fee or oath	ee raiu		
Number Deposit DODEDT TOURSON	1052 50 2052 25 Surcharge - late provisional filing fee or			
Account Name	cover sheet			
The Director is authorized to: (check all that apply)	1053 130 1053 130 Non-English specification  1812 2,520 1812 2,520 For filing a request for <i>ex parte</i> reexamination			
Charge fee(s) indicated below Credit any overpayments				
Charge any additional fee(s) or any underpayment of fee(s)	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action			
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action			
	1251 110 2251 55 Extension for reply within first month			
FEE CALCULATION	1252 420 2252 210 Extension for reply within second month			
1. BASIC FILING FEE Large Entity Small Entity	1253 950 2253 475 Extension for reply within third month			
Fee Fee Fee Fee Fee Description Fee Paid	1254 1,480 2254 740 Extension for reply within fourth month			
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255 2,010 2255 1,005 Extension for reply within fifth month			
1001 770 2001 385 Utility filing fee 1002 340 2002 170 Design filing fee	1401 330 2401 165 Notice of Appeal			
1002 540 2002 170 Design ming fee	1402 330 2402 165 Filing a brief in support of an appeal			
1004 770 2004 385 Reissue filing fee	1403 290 2403 145 Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceeding			
	1452 110 2452 55 Petition to revive - unavoidable			
SUBTOTAL (1) (\$)	1453 1,330 2453 665 Petition to revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		665		
Ext <u>ra Claims below</u> Fee Paid	1502 480 2502 240 Design issue fee			
Total Claims20** = X =	1503 640 2503 320 Plant issue fee			
Independent - 3** = X = X	1460 130 1460 130 Petitions to the Commissioner			
Multiple Dependent	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)			
Large Entity   Small Entity	1806 180 1806 180 Submission of Information Disclosure Stmt			
Fee Fee Fee Fee Fee Description Code (\$)	8021 40 8021 40 Recording each patent assignment per property (times number of properties)			
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809 770 2809 385 Filing a submission after final rejection (37 CFR 1.129(a))			
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770 2810 385 For each additional invention to be			
1204 86 2204 43 ** Reissue independent claims over original patent	examined (37 CFR 1.129(b))  1801 770 2801 385 Request for Continued Examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 1802 900 Request for expedited examination of a design application			
<u> </u>	• • • • • • • • • • • • • • • • • • • •	30		
SUBTOTAL (2) (\$)  **or number previously paid, if greater; For Reissues, see above		79		

SUBMITTED BY				(Complete (if applicable))	
Name (Print/Type)	ROBERT T. JOHNSON	Registration No. (Attorney/Agent)	28,958	Telephone 920 892 8556	
Signature	Kobert , tool	Miser		Date 83/15/2024	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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